



sector 101
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I hereby certify that the correspondence is being deposited with the United States Postal Service as First Class Mail in an envelope addressed to Assistant Commissioner for Patents, Washington, D.C., 20231, on the date indicated below.

BY: Martha D. Helen

DATE: August 23, 1999

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In Re: Patent Application of :
Sean A. McCarthy *et al.* : Attention:
Appln. No.: 09/333,159 : Box Missing Parts
Filed: June 14, 1999 :
For: NOVEL GENES ENCODING PROTEINS : Attorney Docket
HAVING DIAGNOSTIC, PREVENTIVE, : No. 10147-6
THERAPEUTIC, AND OTHER USES : (MBIO99-030)

**RESPONSE TO NOTICE TO FILE MISSING PARTS
OF APPLICATION - FILING DATE GRANTED**

In response to the Notice to File Missing Parts of Application - Filing Date Granted, mailed August 3, 1999, submitted herewith is an executed Declaration and Power of Attorney for the above-identified application.

The filing fee, which was not authorized or paid at the time of filing of this patent application, has been calculated as shown below:

			SMALL ENTITY		LARGE ENTITY		
CLAIMS	NO. FILED	NO. EXTRA	BASIC FEE: \$380.		BASIC FEE: \$760		
Total	23-20 =	3	X9	\$	OR	X18	\$54.00
Independent	3-3=		X39	\$	OR	X78	\$
Multiple Dependent Claims Present			\$130	\$	OR	\$260	\$
			TOTAL	\$	OR	TOTAL	\$814.00

The Commissioner is hereby authorized to charge payment of the following fees, any additional fees or credit any overpayment to Deposit Account No. 50-1017 (210147.0006). One additional copy of this sheet is enclosed.

- The above calculated filing fee \$814.
- The surcharge of \$130 for the late filing of the Declaration and Power of Attorney.
- Any additional fees required under 37 C.F.R. §1.16 or §1.17.
- If the filing of any paper during the prosecution of this application requires an extension of time in order for the paper to be timely filed, applicant(s) hereby petition(s) for the appropriate extension of time pursuant to 37 C.F.R. §1.136(a).

Respectfully submitted,

SEAN A. McCARTHY *ET AL.*

August 23, 1999
(Date)

By:


Gary D. Colby, Ph.D., J.D.

Registration No. 40,961
AKIN, GUMP, STRAUSS, HAUER & FELD, L.L.P.
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GDC/moh
Enclosures



U.S. PATENT AND TRADEMARK OFFICE
Washington, D.C. 20231

APPLICATION NUMBER	FILING/RECEIPT DATE	FIRST NAMED APPLICANT	ATTORNEY DOCKET NO./TITLE
09/333,159	06/14/99	MCCARTHY	S 10147-6

3. 000570 0262/0803
PANITCH SCHWARZE JACOBS & NADEL
ONE COMMERCE SQUARE 22ND FLOOR
2005 MARKET STREET
PHILADELPHIA PA 19103



NOT ASSIGNED

1643

DATE MAILED:

08/03/99

NOTICE TO FILE MISSING PARTS OF APPLICATION

Filing Date Granted

An Application Number and Filing Date have been assigned to this application. The items indicated below, however, are missing. Applicant is given TWO MONTHS FROM THE DATE OF THIS NOTICE within which to file all required items and pay any fees required below to avoid abandonment. Extensions of time may be obtained by filing a petition accompanied by the extension fee under the provisions of 37 CFR 1.136(a). If any of items 1 or 3 through 5 are indicated as missing, the SURCHARGE set forth in 37 CFR 1.16(e) of \$65.00 for a small entity in compliance with 37 CFR 1.27, or \$130.00 for a non-small entity, must also be timely submitted in reply to this NOTICE to avoid abandonment.

If all required items on this form are filed within the period set above, the total amount owed by applicant as a:

small entity (statement filed) non-small entity is \$ 944

1. The statutory basic filing fee is:

missing.

insufficient.

Applicant must submit \$ 760 to complete the basic filing fee and/or file a small entity statement claiming such status (37 CFR 1.27).

2. The following additional claim fees are due: \$ 54

\$ 54 for 3 total claims over 20.

\$ for independent claims over 3.

\$ for multiple dependent claim surcharge.

Applicant must either submit the additional claim fees or cancel additional claims for which fees are due.

3. The oath or declaration:

is missing or unsigned.

does not cover the newly submitted items.

An oath or declaration in compliance with 37 CFR 1.63, including residence information and identifying the application by the above Application Number and Filing Date is required.

4. The signature(s) to the oath or declaration is/are by a person other than inventor or person qualified under 37 CFR 1.42, 1.43 or 1.47.

A properly signed oath or declaration in compliance with 37 CFR 1.63, identifying the application by the above Application Number and Filing Date, is required.

5. The signature of the following joint inventor(s) is missing from the oath or declaration:

An oath or declaration in compliance with 37 CFR 1.63 listing the names of all inventors and signed by the omitted inventor(s), identifying this application by the above Application Number and Filing Date, is required.

6. A \$50.00 processing fee is required since your check was returned without payment (37 CFR 1.21(m)).

7. Your filing receipt was mailed in error because your check was returned without payment.

8. The application was filed in a language other than English.

Applicant must file a verified English translation of the application, the \$130.00 set forth in 37 CFR 1.17(k), unless previously submitted, and a statement that the translation is accurate (37 CFR 1.52(d)).

9. OTHER:

Direct the reply and any questions about this notice to "Attention: Box Missing Parts."

A copy of this notice MUST be returned with the reply.

Robinson

Customer Service Center
Initial Patent Examination Division (703) 308-1202

I hereby certify that this correspondence is being deposited with the United States Postal Service as First Class Mail in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231, on the date indicated below.

BY Jonathan D. Helms DATE August 23, 1999

Receipt
FILE COPY

PATENT

RECEIVED

FEB 07 2000

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re: Patent Application of Sean A. McCarthy, *et al.*

Appln. No.: **09/333,159**

Filed: June 14, 1999

For: NOVEL GENES ENCODING PROTEINS HAVING DIAGNOSTIC, PREVENTIVE, THERAPEUTIC, AND OTHER USES



Office of Initial Patent Examination

Attorney Docket
No. 10147-006US
(MBIO99-030)

REQUEST FOR CORRECTED FILING RECEIPT

Attached is the original Filing Receipt for the above-identified patent application.

There are several errors on the filing receipt. Please note the following:

- 1) The Filing Fee amount is incorrect. No fee was authorized with the June 14, 1999 submission. The correct amount should read as follows: \$814. A copy of the Notice to File Missing Parts authorizing payment of the filing fee is enclosed herewith.
- 2) The first inventor's residence and the second, third and fourth inventors' names and residences have been omitted from the Applicant(s) section of the filing receipt. The information should read as follows:

**SEAN A. MCCARTHY, BOSTON, MA; CHRISTOPHER C. FRASER, LEXINGTON, MA;
JOHN D. SHARP, ARLINGTON, MA; THOMAS M. BARNES, BOSTON, MA**

Please make this correction and provide us with a Corrected Filing Receipt.

Respectfully submitted,

SEAN A. MCCARTHY, *et al.*

By:

GARY D. COLBY, Ph.D., J.D.

Registration No. 40,961

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GDC/srn/moh
Enclosure

FILE COPY

1642

SERIAL NUMBER 09/333,159	FILING DATE 06/14/99	CLASS 435	GROUP ART UNIT 1646	ATTORNEY DOCKET NO. 10147-6
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APPLICANT SEAN A. MCCARTHY, BOSTON, MA; CHRISTOPHER C. FRASER, LEXINGTON, MA;
JOHN D. SHARP, ARLINGTON, MA; THOMAS M. BARNES, BOSTON, MA.

RECEIVED
FEB 07 2000

CONTINUING DOMESTIC DATA***

VERIFIED

371 (NAT'L STAGE) DATA***

VERIFIED

1642

FOREIGN APPLICATIONS***

VERIFIED

IF REQUIRED, FOREIGN FILING LICENSE GRANTED 08/02/99

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY MA	SHEETS DRAWING 53	TOTAL CLAIMS 23	INDEPENDENT CLAIMS 3
Verified and Acknowledged Examiner's Initials _____	Initials _____				

SEE CUSTOMER NUMBER: 000570

ADDRESS

NOVEL GENES ENCODING PROTEINS HAVING DIAGNOSTIC, PREVENTIVE, THERAPEUTIC, AND OTHER USES	
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FILING FEE RECEIVED \$944	FEES: Authority has been given in Paper No. _____ to charge/cr dit DEPOSIT ACCOUNT NO. _____ for the following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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